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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/797,384	03/10/2004	Yun Namkoong	04-06	3202
	7590 04/30/200 OF MONICA H CHOI	EXAMINER		
POBOX 3424			DANG, HUNG Q	
DUBLIN, OH 430160204			ART UNIT	PAPER NUMBER
			2621	
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonvious Cummons	10/797,384 NAMKOONG ET AL.		AL.
Interview Summary	Examiner	Art Unit	
	HUNG Q. DANG	2621	
All participants (applicant, applicant's representative, PTC	personnel):		
(1) <u>HUNG Q. DANG</u> .	(3) <u>MONICA CHOI</u> .		
(2) <u>THAI TRAN</u> .	(4)		
Date of Interview: <u>17 April 2008</u> .			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>1</u> .			
Identification of prior art discussed: Hirata et al.			
Agreement with respect to the claims f) was reached.	g)⊡ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>clarifying Examiner's pool</u> .			
(A fuller description, if necessary, and a copy of the amen allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached	copy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OF THE SUBSTANCE OF THE INTERVIEW ON REVERSE SIDE OF ON Attached sheet.	e last Office action has already R OF ONE MONTH OR THIRT` TERVIEW SUMMARY FORM,	been filed, APP Y DAYS FROM I WHICHEVER IS	LICANT IS THIS LATER, TO
	/Thai Tran/ Supervisory Patent Examiner A.U. 2621	. ,	
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Application No.

Applicant(s)